

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 1

The C/OH Instruction Guide explains how to complete this form.

1 Filer ID (Ethics Commission Filers)

2 Total pages filed:

21

3 CANDIDATE /  
OFFICEHOLDER  
NAME

MS / MRS / MR

FIRST

MI

Mr  
NICKNAME

Eric  
LAST

C  
SUFFIX

Boyce

OFFICE USE ONLY

Date Received

JUL 14 2020 PM 1:31

4 CANDIDATE /  
OFFICEHOLDER  
MAILING  
ADDRESS

ADDRESS / PO BOX;

APT / SUITE #;

CITY;

STATE;

ZIP CODE

132 Driftwood Dr Cedar Park TX 78613

☐ Change of Address

5 CANDIDATE/  
OFFICEHOLDER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

496-5709

6 CAMPAIGN  
TREASURER  
NAME

MS / MRS / MR

FIRST

MI

Mr  
NICKNAME

Kevin  
LAST

W  
SUFFIX

Lancaster

Date Hand-delivered or Date Postmarked

Hand Delivered

Receipt #

Amount \$

Date Processed

7-14-20

Date Imaged

7 CAMPAIGN  
TREASURER  
ADDRESS  
(Residence or Business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #;

CITY;

STATE;

ZIP CODE

1001 Water Hyacinth Cove Leander TX 78641

8 CAMPAIGN  
TREASURER  
PHONE

AREA CODE

PHONE NUMBER

EXTENSION

(512)

585-1300

9 REPORT TYPE

☐ January 15

☐ 30th day before election

☐ Runoff

☐ 15th day after campaign  
treasurer appointment  
(Officeholder Only)

☒ July 15

☐ 8th day before election

☐ Exceeded \$500 limit

☐ Final Report (Attach C/OH - FR)

10 PERIOD  
COVERED

Month

Day

Year

1 / 1 / 2020

THROUGH

Month

Day

Year

6 / 30 / 2020

11 ELECTION

ELECTION DATE

Month

Day

Year

11 / 3 / 2020

ELECTION TYPE

☐ Primary

☐ Runoff

☐ Other  
Description

☒ General

☐ Special

12 OFFICE

OFFICE HELD (if any)

13 OFFICE SOUGHT (if known)

Cedar Park City Council  
Place 4

GO TO PAGE 2

# CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH  
COVER SHEET PG 2

14 C/OH NAME

*Eric C Boyce*

15 Filer ID (Ethics Commission Filers)

16 NOTICE FROM  
POLITICAL  
COMMITTEE(S)

THIS BOX IS FOR NOTICE OF POLITICAL CONTRIBUTIONS ACCEPTED OR POLITICAL EXPENDITURES MADE BY POLITICAL COMMITTEES TO SUPPORT THE CANDIDATE / OFFICEHOLDER. THESE EXPENDITURES MAY HAVE BEEN MADE WITHOUT THE CANDIDATE'S OR OFFICEHOLDER'S KNOWLEDGE OR CONSENT. CANDIDATES AND OFFICEHOLDERS ARE REQUIRED TO REPORT THIS INFORMATION ONLY IF THEY RECEIVE NOTICE OF SUCH EXPENDITURES.

COMMITTEE TYPE

COMMITTEE NAME

☐ GENERAL

☐ SPECIFIC

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ Additional Pages

17 CONTRIBUTION  
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS, OR CONTRIBUTIONS MADE ELECTRONICALLY), UNLESS ITEMIZED

\$ *0*

2. TOTAL POLITICAL CONTRIBUTIONS  
(OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ *15,486<sup>31</sup>*

EXPENDITURE  
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$100 OR LESS,  
UNLESS ITEMIZED

\$

4. TOTAL POLITICAL EXPENDITURES

\$ *9,358<sup>48</sup>*

CONTRIBUTION  
BALANCE

5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY  
OF REPORTING PERIOD

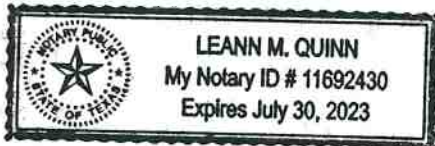
\$ *11,479<sup>05</sup>*

OUTSTANDING  
LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE  
LAST DAY OF THE REPORTING PERIOD

\$ *2,000<sup>00</sup>*

18 AFFIDAVIT



I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

*Eric C Boyce*

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said *Eric Boyce*, this the *14<sup>th</sup>* day of *July*, 20 *20*, to certify which, witness my hand and seal of office.

*Leann M. Quinn*

Signature of officer administering oath

*LeAnn M. Quinn*

Printed name of officer administering oath

*City Sec*

Title of officer administering oath

# SUBTOTALS - C/OH

FORM C/OH  
COVER SHEET PG 3

19 FILER NAME

*Eric C Bayce*

20 Filer ID (Ethics Commission Filers)

21 SCHEDULE SUBTOTALS  
NAME OF SCHEDULE

SUBTOTAL  
AMOUNT

1. ☒ SCHEDULE A1: MONETARY POLITICAL CONTRIBUTIONS

\$ 15,486 <sup>31</sup>

2. ☐ SCHEDULE A2: NON-MONETARY (IN-KIND) POLITICAL CONTRIBUTIONS

\$

3. ☐ SCHEDULE B: PLEDGED CONTRIBUTIONS

\$

4. ☐ SCHEDULE E: LOANS

\$

5. ☒ SCHEDULE F1: POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$ 9,358 <sup>48</sup>

6. ☐ SCHEDULE F2: UNPAID INCURRED OBLIGATIONS

\$

7. ☐ SCHEDULE F3: PURCHASE OF INVESTMENTS MADE FROM POLITICAL CONTRIBUTIONS

\$

8. ☐ SCHEDULE F4: EXPENDITURES MADE BY CREDIT CARD

\$

9. ☐ SCHEDULE G: POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

\$

10. ☐ SCHEDULE H: PAYMENT MADE FROM POLITICAL CONTRIBUTIONS TO A BUSINESS OF C/OH

\$

11. ☐ SCHEDULE I: NON-POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

\$

12. ☐ SCHEDULE K: INTEREST, CREDITS, GAINS, REFUNDS, AND CONTRIBUTIONS RETURNED TO FILER

\$

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

10/8

2 FILER NAME

Eric C Boyce

3 Filer ID (Ethics Commission Filers)

4 Date

1/8/20

5 Full name of contributor

☐ out-of-state PAC (ID#)

Jeffery Klee

6 Contributor address; City; State; Zip Code

605 Riley Trl Cedar Park TX 78613

7 Amount of contribution (\$)

158.21

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/9/20

Full name of contributor

☐ out-of-state PAC (ID#)

Patrick B Summer Shelton

Contributor address; City; State; Zip Code

10019 Silver Mountain Austin TX 78737

Amount of contribution (\$)

300.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/9/20

Full name of contributor

☐ out-of-state PAC (ID#)

David G Johnson

Contributor address; City; State; Zip Code

3977 Fall Creek Rd Spicewood TX 78669

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/9/20

Full name of contributor

☐ out-of-state PAC (ID#)

Eric Perardi

Contributor address; City; State; Zip Code

1116 Verjo Lane Austin TX 78732

Amount of contribution (\$)

526.63

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

2 of 8

2 FILER NAME

Eric C Boyce

3 Filer ID (Ethics Commission Filers)

4 Date

1/17

5 Full name of contributor

☐ out-of-state PAC (ID#:

William Rodgers

6 Contributor address;

City;

State;

Zip Code

106 Arrowhead Trl Cedar Park TX 78613

7 Amount of contribution (\$)

105.58

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/24/20

Full name of contributor

☐ out-of-state PAC (ID#:

Milestone Community Builders

Contributor address;

City;

State;

Zip Code

911 Jollyville Rd #111 Austin TX 78759

Amount of contribution (\$)

2500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/28/20

Full name of contributor

☐ out-of-state PAC (ID#:

Robert Benson

Contributor address;

City;

State;

Zip Code

2304 Berkshire Way Cedar Park TX 78613

Amount of contribution (\$)

105.58

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/20

Full name of contributor

☐ out-of-state PAC (ID#:

Chris Cantu

Contributor address;

City;

State;

Zip Code

1404 Huntington Trl Round Rock TX 78664

Amount of contribution (\$)

200.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

3 of 8

2 FILER NAME

Eric C Boyce

3 Filer ID (Ethics Commission Filers)

4 Date

1/30/20

5 Full name of contributor

Julie Bates

☐ out-of-state PAC (ID#: \_\_\_\_\_)

7 Amount of contribution (\$)

50<sup>00</sup>

6 Contributor address;

City;

State;

Zip Code

1815 Fall Creek Dr Cedar Park Tx 78613

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/30/20

Full name of contributor

Chad and Sara Cantwell

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

50<sup>00</sup>

Contributor address;

City;

State;

Zip Code

1505 Julian's Way Cedar Park Tx 78613

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/20

Full name of contributor

Barbara Schaffer

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

100<sup>00</sup>

Contributor address;

City;

State;

Zip Code

117 Blue Teak Pl Cedar Park Tx 78613

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/20

Full name of contributor

Bob Ingraham

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Amount of contribution (\$)

50<sup>00</sup>

Contributor address;

City;

State;

Zip Code

1804 Main St Cedar Park Tx 78613

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

4 of 8

2 FILER NAME

Eric C Boyce

3 Filer ID (Ethics Commission Filers)

4 Date

1/30/20

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Jerry Suva

6 Contributor address;

City;

State;

Zip Code

4901 Shoal Creek Austin TX 78756

7 Amount of contribution (\$)

263.47

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

1/30/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Emily Montgomery

Contributor address;

City;

State;

Zip Code

929 Yellow Trl Cedar Park TX 78613

Amount of contribution (\$)

26.63

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

1/30/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Redney Robinson

Contributor address;

City;

State;

Zip Code

1604 Metzger Lane Cedar Park TX 78613

Amount of contribution (\$)

105.58

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/3/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Bill Phol

Contributor address;

City;

State;

Zip Code

10800 Pecan Park Blvd Suite 125 Austin TX 78750

Amount of contribution (\$)

1000.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

5 of 8

2 FILER NAME

Eric C Bayce

3 Filer ID (Ethics Commission Filers)

4 Date

2/5/20

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Stephen Cavendar

6 Contributor address;

City;

State;

Zip Code

5730 NW Loop 410 San Antonio TX 78236

7 Amount of contribution (\$)

1052 <sup>95</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/8/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Levi Murray

Contributor address;

City;

State;

Zip Code

1002 Vandervelt Cir Pflugerville TX 78660

Amount of contribution (\$)

105 <sup>58</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Stephen Phillips

Contributor address;

City;

State;

Zip Code

6802 Tree Fern Ln Austin TX 78750

Amount of contribution (\$)

316 <sup>11</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/12/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Doug Denman

Contributor address;

City;

State;

Zip Code

3221 Tanglewood Tr Fort Worth TX 76109

Amount of contribution (\$)

210 <sup>84</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.



# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

6 of 8

2 FILER NAME

Eric C Bayce

3 Filer ID (Ethics Commission Filers)

4 Date

2/13/20

5 Full name of contributor

☐ out-of-state PAC (ID#:

Henry Mayes

6 Contributor address; City; State; Zip Code

PO Box 200339 Austin TX 78720

7 Amount of contribution (\$)

263.47

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

2/20/20

Full name of contributor

☐ out-of-state PAC (ID#:

David Neal

Contributor address; City; State; Zip Code

6409 Via Correto Dr Austin TX 78749

Amount of contribution (\$)

105.58

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/21/20

Full name of contributor

☐ out-of-state PAC (ID#:

Mike Wilfley

Contributor address; City; State; Zip Code

7404 Weldon Dr Austin TX 78750

Amount of contribution (\$)

263.47

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

2/24/20

Full name of contributor

☐ out-of-state PAC (ID#:

Michael Martin

Contributor address; City; State; Zip Code

1408 Rivercliff Dr Spicewood TX 78669

Amount of contribution (\$)

500.00

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

7 of 8

2 FILER NAME

Eric C Boyce

3 Filer ID (Ethics Commission Filers)

4 Date

7/26/20

5 Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Mark Ayotte

6 Contributor address; City; State; Zip Code

1401 Little Elm Trail Unit 300 Cedar Park TX 78613

7 Amount of contribution (\$)

50<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/9/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

JRB Construction

Contributor address; City; State; Zip Code

PO Box 1001 Liberty Hill TX 78642

Amount of contribution (\$)

1000<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Patrick Shelton

Contributor address; City; State; Zip Code

10019 Silver Mountain Dr Austin TX 78737

Amount of contribution (\$)

300<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/10/20

Full name of contributor

☐ out-of-state PAC (ID#: \_\_\_\_\_)

Matthew Gibson

Contributor address; City; State; Zip Code

11106 Alhambra Dr Austin TX 78759

Amount of contribution (\$)

750<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

# MONETARY POLITICAL CONTRIBUTIONS

## SCHEDULE A1

The Instruction Guide explains how to complete this form.

1 Total pages Schedule A1:

8 of 8

2 FILER NAME

Eric C Bayne

3 Filer ID (Ethics Commission Filers)

4 Date

3/11/20

5 Full name of contributor

☐ out-of-state PAC (ID#)

Denovan Davis

6 Contributor address;

City;

State;

Zip Code

4701 Spicewood Springs Rd Suite 200 Austin TX 78755

7 Amount of contribution (\$)

750<sup>00</sup>

8 Principal occupation / Job title (See Instructions)

9 Employer (See Instructions)

Date

3/11/20

Full name of contributor

☐ out-of-state PAC (ID#)

Bob Barton

Contributor address;

City;

State;

Zip Code

222 West Ave #2001 Austin TX 78701

Amount of contribution (\$)

750<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/11/20

Full name of contributor

☐ out-of-state PAC (ID#)

Mark Cheney

Contributor address;

City;

State;

Zip Code

4801 University Blvd Suite 410 Round Rock TX 78665

Amount of contribution (\$)

526<sup>63</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date

3/12/20

Full name of contributor

☐ out-of-state PAC (ID#)

Jeff Haynes

Contributor address;

City;

State;

Zip Code

3440 Ranch Trails #1241 Cedar Park TX 78613

Amount of contribution (\$)

2000<sup>00</sup>

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

If contributor is out-of-state PAC, please see Instruction guide for additional reporting requirements.

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 1 of 10		2 FILER NAME Eric C Bayler		3 Filer ID (Ethics Commission Filers)	
4 Date: 1/4/20		5 Payee name Nicole Woodum Sundquist			
6 Amount (\$) 500 <sup>00</sup>		7 Payee address; 101 Derek Dr		City; Cedar Park	State; TX Zip Code 78613
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Consulting Expense		(b) Description Campaign Services		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 1/7/20		Payee name Duda Website			
Amount (\$) 55 <sup>00</sup>		Payee address; 577 College Ave		City; Palo Alto	State; CA Zip Code 94306
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Website		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held
Date 1/13/20		Payee name Cedar Park Chamber of Commerce			
Amount (\$) 250 <sup>00</sup>		Payee address; 350 Discovery Blvd Suite 207		City; Cedar Park TX	State; TX Zip Code 78613
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Advertising		Description Membership		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought	Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>2 of 10</b>	2 FILER NAME <b>Erin C Boyce</b>	3 Filer ID (Ethics Commission Filers)
4 Date <b>1/13/20</b>	5 Payee name <b>Cedar Park Chamber of Commerce</b>	
6 Amount (\$) <b>300.00</b>	7 Payee address; City; State; Zip Code <b>350 Discovery Blvd Ste 207 Cedar Park TX 78613</b>	
8 PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>	(b) Description <b>Gala</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
9 Complete ONLY if direct expenditure to benefit C/OH		
Date <b>1/15/20</b>	Payee name <b>Jennifer Harvey (Virtually Everything 2025)</b>	
Amount (\$) <b>100.00</b>	Payee address; City; State; Zip Code <b>500 West South St Leander TX 78641</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>	Description <b>Campaign Services</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		
Date <b>1/16/20</b>	Payee name <b>Super Cheap Signs</b>	
Amount (\$) <b>2322.33</b>	Payee address; City; State; Zip Code <b>9200 Waterford Centre Blvd Suite 10 Austin TX 78758</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>yard signs/stakes</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	
Complete ONLY if direct expenditure to benefit C/OH		

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: **3 of 10** 2 FILER NAME **Eric C Boyce** 3 Filer ID (Ethics Commission Filers)

4 Date **1/27/20** 5 Payee name **Eric C Boyce**

6 Amount (\$) **500.00** 7 Payee address; City; State; Zip Code  
**132 Driftwood Dr Cedar Park TX 78613**

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) **Loan Repayment** (b) Description

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **1/28/20** Payee name **Eric C Boyce**

Amount (\$) **500.00** Payee address; City; State; Zip Code  
**132 Driftwood Dr Cedar Park TX 78613**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Loan Repayment** Description

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date **1/29/20** Payee name **HEB**

Amount (\$) **38.45** Payee address; City; State; Zip Code  
**170 E Whitestone Cedar Park TX 78613**

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) **Event Expense** Description **Supplies for Campaign Event**

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 4 of 10		2 FILER NAME Eric C Boyce		3 Filer ID (Ethics Commission Filers)	
4 Date 1/29/20		5 Payee name Coolie Nation			
6 Amount (\$) 189 <sup>95</sup>		7 Payee address; City; State; Zip Code 4200 Atlantic Ave Suite 182 Raleigh NC 27604			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) Advertising		(b) Description Koozies		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/30/20		Payee name Walmart			
Amount (\$) 29 <sup>08</sup>		Payee address; City; State; Zip Code 201 Walton Way Cedar Park TX 78613			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Event Expenses		Description Cup / Plates		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	
Date 1/30/20		Payee name Vans Damm Good			
Amount (\$) 480 <sup>00</sup>		Payee address; City; State; Zip Code 601 E Whitestone Blvd Suite 500 Cedar Park TX 78613			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) Food & Beverage		Description Food Campaign Event		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete ONLY if direct expenditure to benefit C/OH		Candidate / Officeholder name		Office sought Office held	

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 5 of 10 2 FILER NAME Eric C Bayne 3 Filer ID (Ethics Commission Filers)

4 Date 1/31/20 5 Payee name Cedar Park Chamber of Commerce

6 Amount (\$) 250.00 7 Payee address: 350 Discovery Blvd Ste 207 Cedar Park TX 78613 City; State; Zip Code

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) Advertising (b) Description Sponsor Women's Day Event Table Sponsorship

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 2/3/20 Payee name Nicole Woodum Sandquist

Amount (\$) 500.00 Payee address: 101 Derek Dr Cedar Park TX 78613 City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Consulting Expense Description Campaign Services

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date 2/15/20 Payee name Twin Liquors

Amount (\$) 62.50 Payee address: 2800 E Whitestone Cedar Park TX 78613 City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Food & Beverage Description Food & Beverage Neighborhood Campaign Event

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

## SCHEDULE F1

### EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <u>6 of 10</u>		2 FILER NAME <u>Eric C Boyce</u>		3 Filer ID (Ethics Commission Filers)	
4 Date <u>2/16/20</u>		5 Payee name <u>HEB</u>			
6 Amount (\$) <u>156.42</u>		7 Payee address; City; State; Zip Code <u>170 E Whitestone Blvd Cedar Park TX 78613</u>			
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <u>Food &amp; Beverage</u>		(b) Description <u>Food &amp; Beverage Neighborhood Campaign Event</u>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date <u>2/18/20</u>		Payee name <u>Women's Connection Meeting</u>			
Amount (\$) <u>25.00</u>		Payee address; City; State; Zip Code <u>700 E Whitestone Cedar Park TX 78613</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Event Expense</u>		Description <u>Entry Fee</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					
Date <u>2/18/20</u>		Payee name <u>Charles Costen</u>			
Amount (\$) <u>1020.00</u>		Payee address; City; State; Zip Code <u>234 Oldie Oaks Dr Cedar Park TX 78613</u>			
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <u>Advertising Expense</u>		Description <u>Sign Placement</u>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name Office sought Office held					

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>7 of 10</b>		2 FILER NAME <b>Eric C Boyce</b>		3 Filer ID (Ethics Commission Filers)	
4 Date <b>2/27/20</b>		5 Payee name <b>Go Daddy</b>			
6 Amount (\$) <b>38<sup>84</sup></b>		7 Payee address; <b>14435 Hayden Rd 562219</b>		City; <b>Scottsdale</b>	State; <b>AZ</b>
				Zip Code <b>85260</b>	
8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>		(b) Description <b>Website Domain</b>		
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
Date <b>3/2/20</b>		Payee name <b>Facebook</b>			
Amount (\$) <b>6<sup>00</sup></b>		Payee address; <b>1 Hacker Way</b>		City; <b>Menlo Park</b>	State; <b>CA</b>
				Zip Code <b>94025</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>		Description <b>Post</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
Date <b>3/2/20</b>		Payee name <b>Nicole Woodrum Sandquist</b>			
Amount (\$) <b>500<sup>00</sup></b>		Payee address; <b>101 Devel Dr</b>		City; <b>Cedar Park</b>	State; <b>TX</b>
				Zip Code <b>78613</b>	
PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Consulting Expense</b>		Description <b>Campaign Services</b>		
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.		<input type="checkbox"/> Check if Austin, TX, officeholder living expense		
Complete <u>ONLY</u> if direct expenditure to benefit C/OH					
Candidate / Officeholder name		Office sought		Office held	
ATTACH ADDITIONAL COPIES OF THIS SCHEDULE AS NEEDED					

# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: 2 FILER NAME 3 Filer ID (Ethics Commission Filers)

4 Date 5 Payee name

6 Amount (\$) 7 Payee address; City; State; Zip Code

8 PURPOSE OF EXPENDITURE (a) Category (See Categories listed at the top of this schedule) (b) Description

(c) ☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

9 Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

Date Payee name

Amount (\$) Payee address; City; State; Zip Code

PURPOSE OF EXPENDITURE Category (See Categories listed at the top of this schedule) Description

☐ Check if travel outside of Texas. Complete Schedule T. ☐ Check if Austin, TX, officeholder living expense

Complete ONLY if direct expenditure to benefit C/OH Candidate / Officeholder name Office sought Office held

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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense  
Accounting/Banking  
Consulting Expense  
Contributions/Donations Made By  
Candidate/Officeholder/Political Committee  
Credit Card Payment

Event Expense  
Fees  
Food/Beverage Expense  
Gift/Awards/Memorials Expense  
Legal Services

Loan Repayment/Reimbursement  
Office Overhead/Rental Expense  
Polling Expense  
Printing Expense  
Salaries/Wages/Contract Labor

Solicitation/Fundraising Expense  
Transportation Equipment & Related Expense  
Travel In District  
Travel Out Of District  
Other (enter a category not listed above)

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <b>9810</b>	2 FILER NAME <b>Cris C. Boyce</b>	3 Filer ID (Ethics Commission Filers)
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4 Date <b>3/9/20</b>	5 Payee name <b>Facebook</b>
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6 Amount (\$) <b>3.00</b>	7 Payee address; <b>1 Hacker Way</b>	City; <b>Menlo Park</b>	State; <b>CA</b>	Zip Code <b>94025</b>
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8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <b>Advertising</b>	(b) Description <b>Post</b>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

9 Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/9/20</b>	Payee name <b>Facebook</b>
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Amount (\$) <b>5.00</b>	Payee address; <b>1 Hacker Way</b>	City; <b>Menlo Park</b>	State; <b>CA</b>	Zip Code <b>94025</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>Post</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <b>3/30/20</b>	Payee name <b>Facebook</b>
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Amount (\$) <b>551</b>	Payee address; <b>1 Hacker Way</b>	City; <b>Menlo Park</b>	State; <b>CA</b>	Zip Code <b>94025</b>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <b>Advertising</b>	Description <b>Post</b>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T. <input type="checkbox"/> Check if Austin, TX, officeholder living expense	

Complete ONLY if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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# POLITICAL EXPENDITURES MADE FROM POLITICAL CONTRIBUTIONS

SCHEDULE F1

## EXPENDITURE CATEGORIES FOR BOX 8(a)

Advertising Expense	Event Expense	Loan Repayment/Reimbursement	Solicitation/Fundraising Expense
Accounting/Banking	Fees	Office Overhead/Rental Expense	Transportation Equipment & Related Expense
Consulting Expense	Food/Beverage Expense	Polling Expense	Travel In District
Contributions/Donations Made By	Gift/Awards/Memorials Expense	Printing Expense	Travel Out Of District
Candidate/Officeholder/Political Committee	Legal Services	Salaries/Wages/Contract Labor	Other (enter a category not listed above)
Credit Card Payment			

The Instruction Guide explains how to complete this form.

1 Total pages Schedule F1: <i>10 of 10</i>	2 FILER NAME <i>Cris C Boyce</i>	3 Filer ID (Ethics Commission Filers)
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4 Date <i>5/20/20</i>	5 Payee name <i>Super Cheap Signs</i>
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6 Amount (\$) <i>27.51</i>	7 Payee address; City; State; Zip Code <i>9200 Waterford Centre Blvd 56100 Austin TX 78758</i>
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8  PURPOSE OF EXPENDITURE	(a) Category (See Categories listed at the top of this schedule) <i>Advertising</i>	(b) Description <i>Signs</i>
	(c) <input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

9 Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>5/20/20</i>	Payee name <i>Gannys Printing</i>
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Amount (\$) <i>162.38</i>	Payee address; City; State; Zip Code <i>8410 Tuscan Way B Austin TX 78754</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Advertising</i>	Description <i>Signs</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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Date <i>6/16/20</i>	Payee name <i>Unguard Field Strategies</i>
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Amount (\$) <i>1000.00</i>	Payee address; City; State; Zip Code <i>1001 Congress Ave Suite 100 Austin TX 78701</i>
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PURPOSE OF EXPENDITURE	Category (See Categories listed at the top of this schedule) <i>Polling Expense</i>	Description <i>Date</i>
	<input type="checkbox"/> Check if travel outside of Texas. Complete Schedule T.	<input type="checkbox"/> Check if Austin, TX, officeholder living expense

Complete <u>ONLY</u> if direct expenditure to benefit C/OH	Candidate / Officeholder name	Office sought	Office held
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